

L 20000159229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

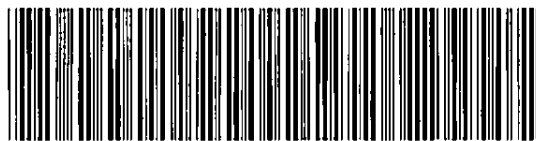
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SEC. OF STATE
TALLAHASSEE, FLORIDA



COLEMAN ' YOVANOVICH ' KOESTER

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Naples, Florida 34103
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Writer's Email:
alpescetto@cyklawfirm.com

April 5, 2024

VIA OVERNIGHT DELIVERY

Division of Corporations
Registration Section
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, Florida 32303

Re: Statement of Authority for SD ST PETE 454, LLC,
a Florida limited liability company
Document # L20000159229

Gentlemen:

Enclosed please find our firm's operating account check number 37280 payable to the Department of State in the amount of \$25.00 in payment of the filing fee for the enclosed *Statement of Authority*.

Please contact me with any questions or comments.

Sincerely,

Amy Pescetto

Enclosures

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: SD ST PETE 454, LLC,
A FLORIDA LIMITED LIABILITY COMPANY

SECOND: The Florida Document Number of the limited liability company is: 1.20000159229

THIRD: The street address of the limited liability company's principal office is:

2639 PROFESSIONAL CIRCLE

SUITE 101

NAPLES, FLORIDA 34119

The mailing address of the limited liability company's principal office is:

2639 PROFESSIONAL CIRCLE

SUITE 101

NAPLES, FLORIDA 34119

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specified person on the following:

1. May execute an instrument transferring real property held in the name of the company.

a. Granted to: BRIAN K. STOCK and/or KEITH GELDER and/or
JOHN FERRY

b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: BRIAN K. STOCK and/or KEITH GELDER and/or
JOHN FERRY

b. No authority granted to: _____


Signature of authorized representative

BRIAN K. STOCK

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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